

01-21-00

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PTO/SB/05 (4/98)

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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(h))</small>		Attorney Docket 02581- P0204A	
		First Inventor or Application Identifier Klaus M. Irion	
		Title Endoscopic Instrument For Performing	
		Express Mail Label No. em387359438US	

APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents</small>		ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231	
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing) 2. <input checked="" type="checkbox"/> Specification [Total Pages 32] (preferred arrangement set forth below) - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claims(s) - Abstract of the Disclosure 3. <input checked="" type="checkbox"/> Drawings(s) (35 USC 113) [Total Sheets 2] 4. Oath or Declaration [Total Pages 0] a. <input type="checkbox"/> New executed (original or copy) b. <input type="checkbox"/> Copy from prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 16 completed) i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting Inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	5. <input type="checkbox"/> Microfiche Computer Program (Appendix) 6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies		

ACCOMPANYING APPLICATION PARTS	
7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 8. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney (where there is an assignee) 9. <input type="checkbox"/> English Translation Document (if applicable) 10. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations 11. <input type="checkbox"/> Preliminary Amendment 12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 13. <input type="checkbox"/> * Small Entity <input type="checkbox"/> Statement filed in prior application Statement(s) Status still proper and desired (PTO/SB/09-12) 14. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 15. <input type="checkbox"/> Other:

NOTE FOR ITEMS 1 & 4D: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).

16. If a **CONTINUING APPLICATION**, check appropriate box and supply the requisite information

☒ Continuation ☐ Divisional ☐ Continuation-in-part of prior application No.:

Prior application information: Examiner Group/Art Unit:

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18. CORRESPONDENCE ADDRESS

☐ Customer Number of Bar Code Label (Insert Customer No or Attach bar code label here) or ☒ Correspondence address below

NAME		Wesley W. Whitmyer, Jr.	
ADDRESS		St. Onge Steward Johnston & Reens LLC	
986 Bedford Street			
CITY	Stamford	STATE	CT
ZIP CODE	06905-5619		
COUNTRY	United States	TELEPHONE	203 324-6155
FAX	203 327-1096		

Name (Print/Type)	Registration No. (Attorney/Agent)
Wesley W. Whitmyer, Jr.	33,558
Signature	Date
<i>[Signature]</i>	1/20/00

Burden Hour Statement: This form is estimated to take 0.2 hour to complete. Times will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Office, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OF COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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<h2 style="margin: 0;">FEE TRANSMITTAL</h2> <p style="margin: 0; font-size: small;">Patent fees are subject to annual revision on October 1. These are the fees effective October 1, 1997. Small Entity payments <u>must</u> be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.</p>				<p>Complete if Known</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application No.</td> <td style="width: 50%;">- Pending</td> </tr> <tr> <td>Filing Date</td> <td>January __, 2000</td> </tr> <tr> <td>First Named Inventor</td> <td>Klaus M. Irion</td> </tr> <tr> <td>Group Art Unit</td> <td></td> </tr> <tr> <td>Examiner Name</td> <td></td> </tr> </table>				Application No.	- Pending	Filing Date	January __, 2000	First Named Inventor	Klaus M. Irion	Group Art Unit		Examiner Name	
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METHOD OF PAYMENT (check one)				FEE CALCULATION (continued)																																																																																																																																																																																					
<p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payment to:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Deposit Account Number</td> <td style="width: 50%;">19-4516</td> </tr> <tr> <td>Deposit Account Name</td> <td>St.Onge Steward Johnston & Reens LLC</td> </tr> </table> <p> <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Charge the issue Fee Set in 37 CFR 1.18 of the Mailing of the Notice of Allowance </p>				Deposit Account Number	19-4516	Deposit Account Name	St.Onge Steward Johnston & Reens LLC	<p>3. ADDITIONAL FEES</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>105</td><td>130</td><td>205</td><td>65</td><td>Surcharge - late filing for or oath</td><td></td></tr> <tr><td>127</td><td>50</td><td>227</td><td>25</td><td>Surcharge - late provisional filing or cover Sheet</td><td></td></tr> <tr><td>139</td><td>130</td><td>139</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>147</td><td>2,520</td><td>147</td><td>2,520</td><td>For filing a request for reexamination</td><td></td></tr> <tr><td>112</td><td>920*</td><td>112</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>113</td><td>1,840</td><td>113</td><td>1,840</td><td>Requesting publication of SIR after Examiner Action</td><td></td></tr> <tr><td>115</td><td>110</td><td>215</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>116</td><td>380</td><td>216</td><td>190</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>117</td><td>870</td><td>217</td><td>435</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>118</td><td>1,360</td><td>218</td><td>680</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>128</td><td>1,850</td><td>228</td><td>925</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>119</td><td>300</td><td>219</td><td>150</td><td>Notice of Appeal</td><td></td></tr> <tr><td>120</td><td>300</td><td>220</td><td>150</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>121</td><td>260</td><td>221</td><td>130</td><td>Request for oral hearing</td><td></td></tr> <tr><td>138</td><td>1,510</td><td>138</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>140</td><td>110</td><td>240</td><td>55</td><td>Petition to revive - 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SUBMITTED BY St.Onge Steward Johnston & Reens LLC				Complete (if applicable)	
Typed or Printed Name		Wesley W. Whitmyer, Jr.		Reg. Number	33,558
Signature				Date	01/20/00
				Deposit Account User ID	19-4516

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PATENT
02581-P0204A WWW

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant	Klaus M. Irion
Serial No. - Pending	January 19, 2000
Title of Application:	Endoscopic Instrument For Performing Endoscopic Procedures

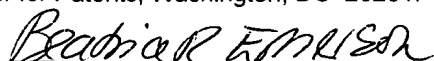
Assistant Commissioner for Patents
Washington, DC 20231

Cover Sheet For Two Sheets Of Drawings

Attorney for Applicant
Wesley W. Whitmyer, Jr., Registration No. 33,558
ST.ONGE STEWARD JOHNSTON & REENS LLC
986 Bedford Street
Stamford, CT 06905-5619
203 324-6155

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January 20, 2000


Beatrice R. Emerson